

## CAMPAIGN CONTRIBUTIONS AND EXPENSES REPORT

State of Nevada

Barbara Clark

WCSD Board of Trustees

C

Name (print)

Office (if applicable)

District (if applicable)

11602 Andes St., Reno, 89506

972-9244

Mailing Address (include city and zip code)

Telephone No.

clark4schoolboard@gbis.com

E-Mail Address

## Select Appropriate Box(es)

- ☒ CANDIDATE   ☐ PAC   ☐ BAG   ☐ POL PRTY   ☐ IND EXP   ☐ NONPROFIT CORP  
☐ AMENDED   ☐ LEGAL DEFENSE FUND   ☐ LOCAL BAG

- ☐ **Annual Filing - Due January 15, 2010**  
 Period: January 1, 2009 - December 31, 2009  
☐ **Report #1 - Due June 1, 2010\***  
 Period: Jan. 1, 2010 - May 27, 2010  
☐ **Report #2 - Due October 26, 2010\***  
 Period: May 28, 2010 - Oct. 21, 2010  
☒ **Report #3 - Due January 15, 2011\*\***  
 Period: Oct. 22, 2008 - Dec. 31, 2010  
☐ **Annual Filing - Due January 15, 2011**  
 Period: Jan. 1, 2010 - Dec. 31, 2010

2011 JAN 14 PM 2:28  
 WASHOE COUNTY  
 REGISTRAR OF VOTERS  
 RECEIVED  
 FOR OFFICE USE ONLY

- \* These Reports are filed by incumbents/candidates running for office in the 2010 election cycle  
 \*\* Third report suffices for 2011 Annual Filing if candidate also filed Report Nos. 1 and 2

## CONTRIBUTIONS SUMMARY

1. Total Monetary Contributions in Excess of \$100  
 (See page 1 of instruction sheet)  
 2. Total Monetary Contributions in the form of loans guaranteed by a third party. (See page 2 of instruction sheet)  
 3. Total Monetary Contributions in the form of loans that were forgiven  
 (See page 2 of instruction sheet)

This Period	Cumulative From Beginning of Report Period #1 Through End of This Reporting Period
3,000.00	5,200.00
	-
-	-

4. Total Amount of Monetary Contributions Received  
 (Add Lines 1 through 4) (See page 2 of instruction sheet)  
 5. Total Amount of Written Commitments for Contributions (When commitment is funded, report as contribution (monetary or in kind))  
 (See page 2 of instruction sheet)  
 6. Total Value of In Kind Contributions Received in Excess of \$100. (See page 2 of instruction sheet)

This Period      Cumulative From Beginning of Report Period #1 Through End of This Reporting Period

	3,000.00	5,200.00
	510.65	

## EXPENSES SUMMARY

7. Total Monetary Expenses Paid in Excess of \$100  
 (See page 2 of instruction sheet)  
 8. Total Value of In Kind Expenses in Excess of \$100. (See page 3 of instruction sheet)

	2,225.00	4,161.56

## AFFIRMATION

I Declare Under Penalty of Perjury That the Foregoing is True and Correct.

Signature

Barbara Clark

Date

1-14-2011

## Report Period # 3

C

District (if applicable)

[illegible]

Page 1 of 4

Barbara Clark

WCSD Board of Trustees

3

Name (print)

Office (if applicable)

District (if applicable)

**Written Commitments in Excess of \$100, or When Added Together from One Entity Exceeds \$100  
Transfer Total Amount of All Written Commitments to Line 5 of Contributions Summary**

NAME AND ADDRESS OF PERSON WHO MADE THE COMMITMENT	DATE OF EACH COMMITMENT	AMOUNT OF EACH COMMITMENT

This page may be copied or duplicated if additional space is needed.

**CAMPAIGN EXPENSES**Report Period **# 3**Barbara Clark  
Name (print)WCSD Board of Trustees  
Office (if applicable)3  
District (if applicable)**Expense Categories**

<b>CATEGORIES</b>	<b>CODE</b>
Office expenses	A
Expenses related to volunteers	B
Expenses related to travel	C
Expenses related to advertising	D
Expenses related to paid staff	E
Expenses related to consultants	F
Expenses related to polling	G
Expenses related to special events	H
** Goods and services provided in kind for which money would otherwise have been paid	I
Other miscellaneous expenses	J

**\*\* NRS 294A.362 requires "In Kind" contributions and expenses to be reported on a separate form, which is attached.**

**CAMPAIGN EXPENSES**Report Period # **3**

Barbara Clark

WCSD Board of Trustees

C

Name (print)

Office (if applicable)

District (if applicable)

**Expenses in Excess of \$100****Transfer Total Amount of All Campaign Expenses to Line7 of Expenses Summary**

<b>NAME AND ADDRESS OF PERSON, GROUP OR ORGANIZATION WHO RECEIVED THE PAYMENT FOR THE EXPENSE(S)</b>	<b>CATEGORY</b> (See Previous Page)  NRS 294A.365	<b>DATE OF EACH EXPENSE</b>	<b>AMOUNT OF EACH EXPENSE</b>
Back Lot Media P.O. Box 18888 Reno, NV 89511	D	10/27/10	2,225.00

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Barbara Clark

WCSD Board of Trustees

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Name (print)

Office (if applicable)

District (if applicable)

**Contributions in Excess of \$100 or, When Added Together from One Contributor Exceeds \$100  
Transfer Total Value of All In-Kind Campaign Contributions to Line 6 of Contributions Summary**

[illegible]

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District (if applicable)

**Expenses in Excess of \$100****Transfer Total Value of All In-Kind Campaign Expenses to Line 8 of Expenses Summary**

NAME AND ADDRESS OF PERSON, GROUP OR ORGANIZATION WHO RECEIVED THE IN KIND GOOD(S) OR SERVICE(S)	DESCRIPTION OF EACH IN KIND EXPENSE	DATE OF EACH IN KIND EXPENSE	VALUE OR COST OF EACH EXPENSE

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In Kind Written Commitments in Excess of \$100, or When Added Together from One Entity Exceeds \$100  
Transfer Total Amount of All Written Commitments to Line 5 of Contributions Summary

NAME AND ADDRESS OF PERSON WHO MADE THE IN KIND COMMITMENT	DATE OF EACH IN KIND COMMITMENT	AMOUNT OF EACH IN KIND COMMITMENT

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